



HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2015
OF THE CONDITION AND AFFAIRS OF THE
Arcadian Health Plan, Inc.

NAIC Group Code 0119 0119 NAIC Company Code 12151 Employer's ID Number 20-1001348
(Current) (Prior)

Organized under the Laws of Washington, State of Domicile or Port of Entry Washington

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [X] No []

Incorporated/Organized 04/06/2004 Commenced Business 01/01/2005

Statutory Home Office 300 Deschutes Way SW, Suite 304, Tumwater, WA, US 98501
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 500 West Main Street
(Street and Number)
Louisville, KY, US 40202 502-580-1000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 740036, Louisville, KY, US 40201-7436
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 500 West Main Street
(Street and Number)
Louisville, KY, US 40202 502-580-1000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.humana.com

Statutory Statement Contact Amanda Nethery, 502-580-1624
(Name) (Area Code) (Telephone Number)
DOIINQUIRIES@humana.com 502-580-2099
(E-mail Address) (FAX Number)

OFFICERS

President & CEO Bruce Dale Broussard Sr. VP & CFO Brian Andrew Kane
VP & Corporate Secretary Joan Olliges Lenahan VP & Appointed Actuary & Interim Chief Actuary Jonathan Albert Canine

OTHER

<u>Alan James Bailey</u> VP & Treasurer	<u>Elizabeth Diane Bierbower</u> Pres, Employer Group Segment	<u>John Gregory Catron</u> VP & Chief Compliance Officer
<u>Mark Sobhi El-Tawil</u> VP & Div. Leader - Western Div.	<u>Jeffrey Carl Fernandez</u> # Segment VP, Medicare: West	<u>Brian Phillip LeClaire</u> Sr.VP & Chief Info Officer
<u>Steven Edward McCutley</u> SVP, Medicare Operations	<u>William Mark Preston</u> VP-Investment Management	<u>Richard Donald Remmers</u> VP, Employer Group Segment
<u>George Renaudin</u> Seg. VP, Medicare: East	<u>Donald Hank Robinson</u> Vice President - Tax	<u>Joseph Christopher Ventura</u> Assistant Corporate Secretary
<u>Timothy Alan Wheatley</u> President, Retail Segment	<u>Ralph Martin Wilson</u> Vice President	<u>Cynthia Hillebrand Zipperle</u> # VP & Chief Accounting Officer

DIRECTORS OR TRUSTEES

Bruce Dale Broussard Brian Andrew Kane # James Elmer Murray

State of Kentucky SS:
County of Jefferson

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Bruce Dale Broussard
President & CEO

Joan Olliges Lenahan
VP & Corporate Secretary

Alan James Bailey
VP & Treasurer

Subscribed and sworn to before me this 10th day of November, 2015
Michelle Sizemore
Notary Public
January 3, 2019

a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed.....
3. Number of pages attached.....

Michelle H. Sizemore
State at Large
Kentucky
My Commission Expires Jan. 3, 2019

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	43,706,674	0	43,706,674	46,465,173
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	9,034,397
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0
5. Cash (\$(715,554)), cash equivalents (\$9,999,883) and short-term investments (\$9,257,849)	18,542,178	0	18,542,178	2,912,048
6. Contract loans (including \$0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	500,000	0	500,000	1,330,000
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	62,748,852	0	62,748,852	59,741,618
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	366,780	0	366,780	329,418
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	651,696	47,135	604,561	81,471
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums	357,577	0	357,577	276,034
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	4,704,894	0	4,704,894	3,313,889
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	1,218,811	25,553	1,193,258	1,196,989
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	4,105	624	3,481	36,312
21. Furniture and equipment, including health care delivery assets (\$0)	11	11	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	72,117	0	72,117	0
24. Health care (\$1,081,882) and other amounts receivable	1,103,772	4,197	1,099,575	699,753
25. Aggregate write-ins for other than invested assets	2,915,264	282,536	2,632,728	3,437,206
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	74,143,879	360,056	73,783,823	69,112,690
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	74,143,879	360,056	73,783,823	69,112,690
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Risk Adjustment Premium Receivables	2,632,728	0	2,632,728	3,437,206
2502. Prepaid Commissions	200,250	200,250	0	0
2503. Deposits	53,017	53,017	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	29,269	29,269	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	2,915,264	282,536	2,632,728	3,437,206

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded)	8,153,622	660,353	8,813,975	7,636,877
2. Accrued medical incentive pool and bonus amounts	0	0	0	0
3. Unpaid claims adjustment expenses	108,734	0	108,734	100,876
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	351,438	0	351,438	310,248
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	81,964	0	81,964	50,661
9. General expenses due or accrued	47,035	0	47,035	477,163
10.1 Current federal and foreign income tax payable and interest thereon (including \$145,783 on realized gains (losses))	99,807	0	99,807	1,933,818
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others.....	1,014	0	1,014	1,131
13. Remittances and items not allocated	1,062	0	1,062	190,848
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	0	0	0	252,870
16. Derivatives	0	0	0	0
17. Payable for securities	175,000	0	175,000	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	384,210	0	384,210	264,800
23. Aggregate write-ins for other liabilities (including \$30,960 current)	30,960	0	30,960	15,339
24. Total liabilities (Lines 1 to 23)	9,434,846	660,353	10,095,199	11,234,631
25. Aggregate write-ins for special surplus funds	XXX	XXX	937,229	1,440,149
26. Common capital stock	XXX	XXX	600,000	600,000
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	67,600,025	68,701,699
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(5,448,630)	(12,863,789)
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$0)	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	63,688,624	57,878,059
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	73,783,823	69,112,690
DETAILS OF WRITE-INS				
2301. Risk Adjustment Premium Payables	30,960	0	30,960	15,339
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	30,960	0	30,960	15,339
2501. Special Surplus – Projected HCRL Assessment for the Upcoming Year	XXX	XXX	937,229	1,440,149
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	937,229	1,440,149
3001.	XXX	XXX	0	0
3002.	XXX	XXX	0	0
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	68,484	63,457	81,389
2. Net premium income (including \$0 non-health premium income).....	XXX	52,994,615	52,833,260	70,060,671
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	0	0	0
4. Fee-for-service (net of \$0 medical expenses).....	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	52,994,615	52,833,260	70,060,671
Hospital and Medical:				
9. Hospital/medical benefits	3,629,939	42,448,069	32,604,761	41,537,469
10. Other professional services	0	1,159,855	1,146,666	1,537,365
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	162,285	2,315,925	1,407,269	2,600,251
13. Prescription drugs	0	4,692,396	4,222,966	5,056,477
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	0	0	0
16. Subtotal (Lines 9 to 15)	3,792,224	50,616,245	39,381,662	50,731,562
Less:				
17. Net reinsurance recoveries	0	0	0	0
18. Total hospital and medical (Lines 16 minus 17)	3,792,224	50,616,245	39,381,662	50,731,562
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including \$2,458,308 cost containment expenses	0	2,769,834	2,217,141	2,961,846
21. General administrative expenses	0	5,952,308	6,518,177	8,054,912
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only)	0	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	3,792,224	59,338,387	48,116,980	61,748,320
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(6,343,772)	4,716,280	8,312,351
25. Net investment income earned	0	1,016,408	2,187,370	2,536,813
26. Net realized capital gains (losses) less capital gains tax of \$164,992	0	306,337	(172,586)	(18,606)
27. Net investment gains (losses) (Lines 25 plus 26)	0	1,322,745	2,014,784	2,518,207
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0)].....	0	0	0	0
29. Aggregate write-ins for other income or expenses	0	(2,972)	17	(283)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(5,023,999)	6,731,081	10,830,275
31. Federal and foreign income taxes incurred	XXX	(1,643,736)	1,469,951	3,320,857
32. Net income (loss) (Lines 30 minus 31)	XXX	(3,380,263)	5,261,130	7,509,418
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. Miscellaneous Income	0	8	17	45
2902. Loss on Disposal	0	(2,980)	0	(328)
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(2,972)	17	(283)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	57,878,059	70,334,818	70,334,818
34. Net income or (loss) from Line 32	(3,380,263)	5,261,130	7,509,418
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$0	(9,034,496)	(452,880)	(98,452)
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	0	0	(272,534)
39. Change in nonadmitted assets	(69,031)	518,997	399,887
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in	(1,101,674)	3,494	4,922
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	(20,000,000)	(20,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	19,396,029	0	0
48. Net change in capital & surplus (Lines 34 to 47)	5,810,565	(14,669,259)	(12,456,759)
49. Capital and surplus end of reporting period (Line 33 plus 48)	63,688,624	55,665,559	57,878,059
DETAILS OF WRITE-INS			
4701. Change in Unassigned Surplus due to Merger with Arcadian Management Services, Inc.	19,396,029	0	0
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	19,396,029	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	53,305,451	52,722,540	68,592,559
2. Net investment income	1,218,878	2,601,014	3,100,685
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	54,524,329	55,323,554	71,693,244
5. Benefit and loss related payments	49,818,840	57,549,145	70,242,566
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	10,418,979	10,590,717	13,041,511
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$112,139 tax on capital gains (losses)	351,536	(3,273,848)	(3,171,812)
10. Total (Lines 5 through 9)	60,589,355	64,866,014	80,112,265
11. Net cash from operations (Line 4 minus Line 10)	(6,065,026)	(9,542,460)	(8,419,021)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	19,644,979	37,169,474	47,968,159
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	1,005,420	121,014	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	20,650,399	37,290,488	47,968,159
13. Cost of investments acquired (long-term only):			
13.1 Bonds	16,655,502	4,313,537	14,896,226
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	1,140,000	1,330,000
13.7 Total investments acquired (Lines 13.1 to 13.6)	16,655,502	5,453,537	16,226,226
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	3,994,897	31,836,951	31,741,933
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	(1,101,674)	3,494	4,922
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	20,000,000	20,000,000
16.6 Other cash provided (applied)	18,801,933	622,035	696,763
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	17,700,259	(19,374,471)	(19,298,315)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) ..	15,630,130	2,920,020	4,024,597
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	2,912,048	(1,112,549)	(1,112,549)
19.2 End of period (Line 18 plus Line 19.1)	18,542,178	1,807,471	2,912,048

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	6,958	0	0	0	0	183	0	6,775	0	0
2. First Quarter	7,477	0	0	0	0	0	0	7,477	0	0
3. Second Quarter	7,740	0	0	0	0	0	0	7,740	0	0
4. Third Quarter	7,807	0	0	0	0	0	0	7,807	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	68,484	0	0	0	0	0	0	68,484	0	0
Total Member Ambulatory Encounters for Period:										
7. Physician	96,034	0	0	0	0	0	0	96,034	0	0
8. Non-Physician	83,539	0	0	0	0	0	0	83,539	0	0
9. Total	179,573	0	0	0	0	0	0	179,573	0	0
10. Hospital Patient Days Incurred	18,154	0	0	0	0	0	0	18,154	0	0
11. Number of Inpatient Admissions	1,725	0	0	0	0	0	0	1,725	0	0
12. Health Premiums Written (a)	52,994,615	0	0	0	0	0	0	52,994,615	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	52,994,615	0	0	0	0	0	0	52,994,615	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services.....	49,818,838	0	0	0	0	1,360	0	49,817,478	0	0
18. Amount Incurred for Provision of Health Care Services	50,616,245	0	0	0	0	0	0	50,616,245	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 52,994,615

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

[illegible]

88

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)	0	0	0	0	0	0
2. Medicare Supplement	0	0	0	0	0	0
3. Dental Only	1,360	0	0	0	1,360	1,360
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0
6. Title XVIII - Medicare	7,095,052	42,722,428	189,813	8,624,162	7,284,865	7,635,517
7. Title XIX - Medicaid	0	0	0	0	0	0
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	7,096,412	42,722,428	189,813	8,624,162	7,286,225	7,636,877
10. Healthcare receivables (a)	0	1,075,944	0	0	0	696,251
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0
13. Totals (Lines 9-10+11+12)	7,096,412	41,646,484	189,813	8,624,162	7,286,225	6,940,626

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

STATEMENT AS OF September 30, 2015 OF Arcadian Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Washington Office of Insurance.

The Washington Office of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Washington for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Washington Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Washington. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations exist.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Washington is shown below:

	State of Domicile	2015	2014
Net (Loss)/Income			
1. Arcadian Health Plan, Inc. Washington basis	WA	\$ (3,380,263)	\$ 7,509,418
2. State Prescribed Practices that increase/(decrease) NAIC SAP	WA	-	-
3. State Permitted Practices that increase/(decrease) NAIC SAP	WA	-	-
4. NAIC SAP	WA	\$ <u>(3,380,263)</u>	\$ <u>7,509,418</u>
Surplus			
5. Arcadian Health Plan, Inc. Washington basis	WA	\$ 63,688,624	\$ 57,878,059
6. State Prescribed Practices that increase/(decrease) NAIC SAP	WA	-	-
7. State Permitted Practices that increase/(decrease) NAIC SAP	WA	-	-
8. NAIC SAP	WA	\$ <u><u>63,688,624</u></u>	\$ <u><u>57,878,059</u></u>

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members' prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.
- (2-4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value. Common stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. For all securities other than loan-backed and structured securities, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value, the near term prospects for recovery to carrying value, and the Company's intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

NOTES TO THE FINANCIAL STATEMENTS

- (5) Not Applicable.
- (6) For loan backed and structured securities where the securities fair value is less then the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.
- (7) Not Applicable.
- (8) Not Applicable.
- (9) Not Applicable.
- (10-11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

- (12) The Company has not modified its capitalization policy from the prior period.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax bases of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.
- (13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.
- (14) Not Applicable.
- (15) Not Applicable.

2. Accounting Changes and Corrections of Errors

Not Applicable.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

- a. With the approval from the Washington Office of Insurance, Arcadian Management Services, Inc. merged with Arcadian Health Plan, Inc. on July 31, 2015.
- b. This transaction was accounted for as a statutory merger in accordance with SSAP No. 68, *Business Combinations & Goodwill* ("SSAP No. 68").
- c. Prior to the July 31, 2015 merger, Humana Inc. the parent of Arcadian Management Services, Inc., owned all 1,000 shares of outstanding common stock of Arcadian Management Services, Inc. and Arcadian Management Services, Inc., the parent of Arcadian Health Plan, Inc. , owned all 60,000 shares of outstanding common stock of Arcadian Health Plan, Inc. Effective upon the merger, the 1,000 shares of Arcadian Management Services, Inc.'s outstanding stock were retired.

STATEMENT AS OF September 30, 2015 OF Arcadian Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

- d. Pre-merger separate company revenue and net income (loss) for the seven months ended July 31, 2015 (unaudited) were \$0 and \$41,286,538 respectively for Arcadian Management Services, Inc. and \$50,813 and \$(3,308,065), respectively for Arcadian Health Plan, Inc.
 - e. SSAP No. 3, Accounting Changes and Corrections of Errors ("SSAP No. 3") requires prior year amounts to be restated as if the merger had occurred as of January 1, 2013 unless the merging entity, Arcadian Management Services, Inc., met the definition of a shell company. Arcadian Management Services, Inc. met the definition of a shell company and thus no prior year restatement has been performed. Since prior year was not restated, Arcadian Health Plan, Inc.'s surplus was adjusted for Arcadian Management Services, Inc.'s pre-merger surplus balances.
- C. Assumption Reinsurance
- Not Applicable.
- D. Impairment Loss
- Not Applicable.
4. Discontinued Operations
- Not Applicable.
5. Investments
- A. Mortgage Loans, Including Mezzanine Real Estate Loans
- Not Applicable.
- B. Debt Restructuring
- Not Applicable.
- C. Reverse Mortgages
- Not Applicable.
- D. Loan-Backed Securities
- (1) Not Applicable.
 - (2) Not Applicable.
 - (3) Not Applicable.
 - (4) The Company does not have any investments in an other-than-temporary impairment position at September 30, 2015.
- Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at September 30, 2015:
- (a) The aggregate amount of unrealized losses:
 - 1. Less than Twelve Months \$ (3,344)
 - 2. Twelve Months or Longer \$ (541,558)
 - (b) The aggregate related fair value of securities with unrealized losses:
 - 1. Less than Twelve Months \$ 2,516,383
 - 2. Twelve Months or Longer \$ 6,787,570
- The unrealized losses at September 30, 2015 were primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.
- (5) Not Applicable.
- E. Repurchase Agreements and/or Securities Lending Transactions
- (1) The Company has no repurchase agreements or securities lending transactions.
 - (2) The Company has not pledged any of its assets as collateral.
 - (3-7) Not Applicable.
- F. Real Estate
- Not Applicable.
- G. Low-Income Housing Tax Credits (LIHTC)

STATEMENT AS OF September 30, 2015 OF Arcadian Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

Not Applicable.

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase/ (Decrease)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Percentage Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	-%	-%
b. Collateral held under security lending agreements	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-
h. Letter stock or securities restricted to sale – excluding FHLB capital stock	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-
j. On deposit with states	11,655,596	11,325,435	330,161	11,655,596	15.72%	15.80%
k. On deposit with other regulatory bodies	-	-	-	-	-	-
l. Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-
o. Total Restricted Assets	\$ 11,655,596	\$ 11,325,435	\$ 330,161	\$ 11,655,596	15.72%	15.80%

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

(3) Detail of Other Restricted Assets Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

I. Working Capital Finance Investments

Not Applicable.

J. Offsetting and Netting of Assets and Liabilities

Not Applicable.

K. Structured Notes

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.
- B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

- A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default.

- B. The total amount excluded was \$0.

STATEMENT AS OF September 30, 2015 OF Arcadian Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

8. Derivative Instruments

Not Applicable.

9. Income Taxes

No material change since year-end December 31, 2014.

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-F. The Company has several management contracts with Humana Inc. and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2014 and 2013 were \$9,211,345 and \$8,202,283, respectively. As a part of this agreement, Humana Inc. makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. Humana Inc. is reimbursed by the Company weekly, based upon historical pattern of amounts and timing. Each month, these estimates are adjusted to ultimately settle upon actual disbursements made on behalf of the Company. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana Inc. not be able to fulfill its obligations.

No dividends were paid by the Company as of September 30, 2015.

At September 30, 2015, the Company reported \$72,117 due from Humana Inc.. Amounts due to or from parent are generally settled within 30 days.

G. All outstanding shares of the Company are owned by the Parent Company.

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

11. Debt

A. Debt Including Capital Notes

The Company has no debentures outstanding.

The Company has no capital notes outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A.-D. Defined Benefit Plans

Not Applicable.

E. Defined Contribution Plans

Not Applicable.

F. Multiemployer Plans

Not Applicable.

G. Consolidated/Holding Company Plans

No material change since year-end December 31, 2014.

H. Postemployment Benefits and Compensated Absences

Not Applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) The Company has \$10 par value common stock with 60,000 shares authorized and 60,000 shares issued and 60,000 outstanding. All shares are common stock shares.

NOTES TO THE FINANCIAL STATEMENTS

(2) The Company has no preferred stock outstanding.

(3-5) Dividends are noncumulative and are paid as determined by the Board of Directors. Dividends are subject to the approval of the Washington Office of Insurance if such dividend distribution exceeds the lesser of the Company's prior year net operating profits or 10 percent of policyholders surplus funds derived from realized net operating profits.

Within the limitations above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

No dividends were paid by the Company as of September 30, 2015.

(6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

(7) Not Applicable.

(8) Not Applicable.

(9) Changes in balances of special surplus funds from the prior year is due to the estimated health insurance industry fee that will be payable on September 30, 2016.

(10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$(9,034,496).

(11) Not Applicable.

(12) Not Applicable.

(13) Not Applicable.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits

Not Applicable.

E. Joint and Several Liabilities

Not Applicable.

F. All Other Contingencies

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Company does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of September 30, 2015.

15. Leases

No material change since year-end December 31, 2014.

16. Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has no investment in Financial Instruments with Off-Balance Sheet Risk or Concentrations of Credit Risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not Applicable.

B. Transfer and Servicing of Financial Assets

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

C. Wash Sales

Not Applicable.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

Not Applicable.

B. ASC Plans

Not Applicable.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

- (1) The Company records no revenue explicitly attributable to the cost share and reinsurance components of its Medicare or other similarly structured cost based reimbursement contracts.
- (2) As of September 30, 2015, the Company has recorded a receivable from CMS of \$4,704,894 related to the cost share and reinsurance components of administered Medicare products. The Company does not have any additional receivables greater than 10% of the Company’s accounts receivable from uninsured accident and health plans or \$10,000.
- (3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company’s Medicare or other similarly structured cost based reimbursement contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.
- (4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

20. Fair Value Measurements

A. (1) The fair value of financial assets at September 30, 2015 were as follows:

	Level 1	Level 2	Level 3	Total
a. Assets at fair value				
Bonds				
U.S. governments	\$ -	\$ -	\$ -	\$ -
Tax-exempt municipal	-	-	-	-
Residential mortgage-backed	-	-	-	-
Corporate debt securities	-	39,900	-	39,900
Total bonds	-	39,900	-	39,900
Total assets at fair value	\$ -	\$ 39,900	\$ -	\$ 39,900
b. Liabilities at fair value	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -

The Company reports transfers between Level 1 and Level 2 of the fair value hierarchy levels at the end of the reporting period. There were no transfers between Level 1 and Level 2 of the fair value hierarchy between December 31, 2014 and September 30, 2015.

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Not Applicable.

- (3) The Company reports transfers into or out of Level 3 of the fair value hierarchy levels at the end of the reporting period. There were no transfers into or out of Level 3 of the fair value hierarchy levels between December 31, 2014 and September 30, 2015.
- (4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company’s analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company’s third party investment advisor. Based on the Company’s internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the quarter ended September 30, 2015.

NOTES TO THE FINANCIAL STATEMENTS

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

C. Fair Values for All Financial Instruments by Levels 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	\$ 39,900	\$ 39,900	\$ -	\$ 39,900	\$ -	\$ -

D. Financial Instruments for which Not Practicable to Estimate Fair Values

Not Applicable.

21. Other Items

A. Extraordinary Items

Not Applicable.

B. Troubled Debt Restructuring: Debtors

Not Applicable.

C. Other Disclosures and Unusual Items

Not Applicable.

D. Business Interruption Insurance Recoveries

Not Applicable.

E. State Transferable and Non-transferable Tax Credits

Not Applicable.

F. Subprime Mortgage Related Risk Exposure

(1) The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management’s practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.

(2) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

(3) Direct exposure through other investments:

- a. Residential mortgage backed securities – No substantial exposure noted.
- b. Commercial mortgage backed securities – No substantial exposure noted.
- c. Collateralized debt obligations – No substantial exposure noted.
- d. Structured securities – No substantial exposure noted.
- e. Equity investment in SCAs – No substantial exposure noted.
- f. Other assets – No substantial exposure noted.
- g. Total – No substantial exposure noted.

(4) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

Not Applicable.

Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

G. Retained Assets

Not Applicable.

22. Events Subsequent

The Company is not aware of any events or transactions occurring subsequent to the close of the books for this statement

STATEMENT AS OF September 30, 2015 OF Arcadian Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

which may have a material effect on its financial condition. Subsequent events have been considered through November 10, 2015 for the Statutory Statement issued on November 10, 2015.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10.0 percent or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (X)

- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes () No (X)

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.

- B. The Company records accrued retrospective premium as an adjustment to earned premiums.

- C. The amount of net premiums written by the Company at September 30, 2015 that are subject to retrospective rating features was \$52,994,615, or 100.00% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.

- D. Medical loss ratio rebates required pursuant to the Public Health Service Act

Not Applicable.

- E. Risk Sharing Provisions of the Affordable Care Act

Not Applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2014 were \$7,709,504. As of September 30, 2015, \$7,867,745 has been paid for incurred

STATEMENT AS OF September 30, 2015 OF Arcadian Health Plan, Inc.

NOTES TO THE FINANCIAL STATEMENTS

claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$191,675 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$349,916 favorable prior-year development since December 31, 2014. The increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. The Company did not experience any material prior year claim development on retrospectively rated policies.

26. Intercompany Pooling Arrangements

Not Applicable.

27. Structured Settlements

The Company has no structured settlements.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 181 Days after Billing
12/31/2015	\$ -	\$ -	\$ -	\$ -	\$ -
9/30/2015	1,078,261	1,078,261	-	-	-
6/30/2015	916,072	916,072	915,295	-	-
3/31/2015	758,248	758,248	757,895	-	-
12/31/2014	683,514	683,514	683,514	-	-
9/30/2014	843,869	843,869	840,460	-	342
6/30/2014	956,656	956,656	947,034	7,334	2,288
3/31/2014	991,513	991,513	976,623	12,552	2,338
12/31/2013	1,442,886	1,442,886	1,435,977	6,909	-
9/30/2013	1,084,646	1,084,646	1,081,627	1,781	1,238
6/30/2013	1,050,086	1,050,086	1,050,086	-	-
3/31/2013	1,372,973	1,372,973	1,372,843	-	130

B. Risk Sharing Receivables

Not Applicable.

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

Not Applicable.

31. Anticipated Salvage and Subrogation

Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☒ No ☐
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☒ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes ☒ No ☐
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☒ No ☐
- 4.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
Arcadian Management Services, Inc.		DE
5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes ☐ No ☒ N/A ☐
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2012
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2012
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

02/17/2014
- 6.4

By what department or departments?
Washington Department of Insurance
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☒ No ☐ N/A ☐
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ No ☐ N/A ☐
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code.

Yes [X] No []
- 9.11

If the response to 9.1 is No, please explain:
- 9.2

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
Revised based on general policy and regulatory changes
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [X] No []
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$72,117

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes [] No [X]
- 11.2

If yes, give full and complete information relating thereto:
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$0
13.

Amount of real estate and mortgages held in short-term investments:

\$0
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [] No [X]
- 14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$0
14.22 Preferred Stock	\$0	\$0
14.23 Common Stock	\$9,034,397	\$0
14.24 Short-Term Investments	\$0	\$0
14.25 Mortgage Loans on Real Estate	\$0	\$0
14.26 All Other	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$9,034,397	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$0	\$0
- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes [] No [X]
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes [] No []

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

\$

0
- 16.2

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$

0
- 16.3

Total payable for securities lending reported on the liability page.

\$

0

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes ☒ No ☐

- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase	4 Metro Tech Center, 16th Floor Mail Code: NY1-C512, Brooklyn, NY 11245, Attn: Barbara J. Walsh

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes ☐ No ☒

- 17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

- 17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
107105.00	Blackrock, Inc.	55 East 52nd Street, New York, NY 10055

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes ☒ No ☐

- 18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent

100.2 %
- 1.2 A&H cost containment percent

4.6 %
- 1.3 A&H expense percent excluding cost containment expenses

19.1 %
- 2.1 Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date

\$0
- 2.3 Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date

\$0

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1	2	3	4	5	6	7	8	9
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
			NONE					

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

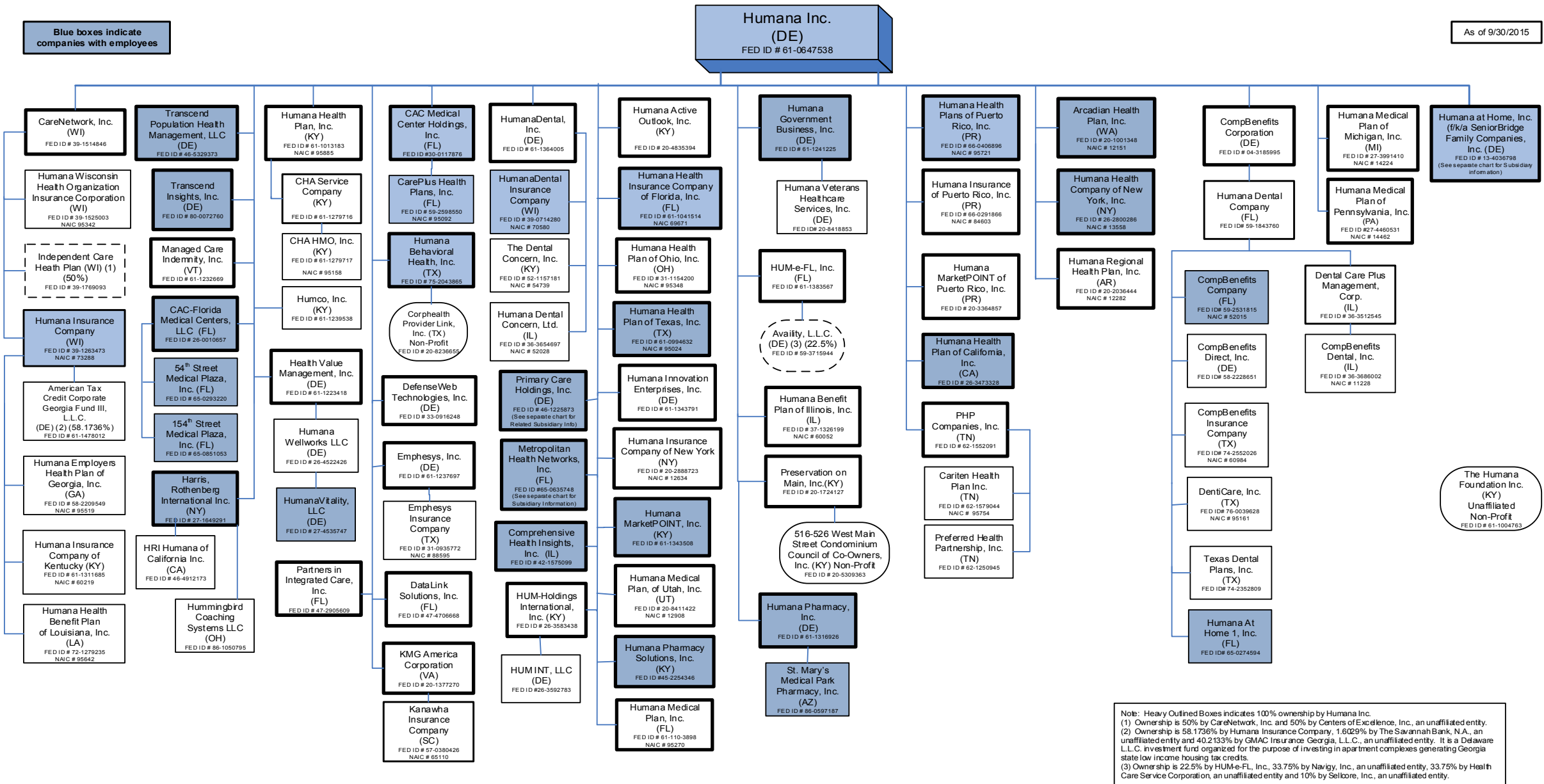
Current Year to Date - Allocated by States and Territories

		1	Direct Business Only							
States, etc.		Active Status	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama.....AL	N	0	0	0	0	0	0	0	0
2.	Alaska.....AK	N	0	0	0	0	0	0	0	0
3.	Arizona.....AZ	L	0	(9,888)	0	0	0	0	(9,888)	0
4.	Arkansas.....AR	N	0	0	0	0	0	0	0	0
5.	California.....CA	L	0	(5,943)	0	0	0	0	(5,943)	0
6.	Colorado.....CO	N	0	0	0	0	0	0	0	0
7.	Connecticut.....CT	N	0	0	0	0	0	0	0	0
8.	Delaware.....DE	N	0	0	0	0	0	0	0	0
9.	District of Columbia.....DC	N	0	0	0	0	0	0	0	0
10.	Florida.....FL	N	0	0	0	0	0	0	0	0
11.	Georgia.....GA	N	0	0	0	0	0	0	0	0
12.	Hawaii.....HI	N	0	0	0	0	0	0	0	0
13.	Idaho.....ID	N	0	0	0	0	0	0	0	0
14.	Illinois.....IL	N	0	0	0	0	0	0	0	0
15.	Indiana.....IN	L	0	0	0	0	0	0	0	0
16.	Iowa.....IA	N	0	0	0	0	0	0	0	0
17.	Kansas.....KS	N	0	0	0	0	0	0	0	0
18.	Kentucky.....KY	L	0	0	0	0	0	0	0	0
19.	Louisiana.....LA	N	0	0	0	0	0	0	0	0
20.	Maine.....ME	L	0	34,569,939	0	0	0	0	34,569,939	0
21.	Maryland.....MD	N	0	0	0	0	0	0	0	0
22.	Massachusetts.....MA	N	0	0	0	0	0	0	0	0
23.	Michigan.....MI	N	0	0	0	0	0	0	0	0
24.	Minnesota.....MN	N	0	0	0	0	0	0	0	0
25.	Mississippi.....MS	N	0	0	0	0	0	0	0	0
26.	Missouri.....MO	L	0	3,864	0	0	0	0	3,864	0
27.	Montana.....MT	N	0	0	0	0	0	0	0	0
28.	Nebraska.....NE	N	0	0	0	0	0	0	0	0
29.	Nevada.....NV	N	0	0	0	0	0	0	0	0
30.	New Hampshire.....NH	L	0	18,464,721	0	0	0	0	18,464,721	0
31.	New Jersey.....NJ	N	0	0	0	0	0	0	0	0
32.	New Mexico.....NM	N	0	0	0	0	0	0	0	0
33.	New York.....NY	N	0	0	0	0	0	0	0	0
34.	North Carolina.....NC	N	0	0	0	0	0	0	0	0
35.	North Dakota.....ND	N	0	0	0	0	0	0	0	0
36.	Ohio.....OH	N	0	0	0	0	0	0	0	0
37.	Oklahoma.....OK	N	0	0	0	0	0	0	0	0
38.	Oregon.....OR	N	0	0	0	0	0	0	0	0
39.	Pennsylvania.....PA	N	0	0	0	0	0	0	0	0
40.	Rhode Island.....RI	N	0	0	0	0	0	0	0	0
41.	South Carolina.....SC	L	0	(19,443)	0	0	0	0	(19,443)	0
42.	South Dakota.....SD	N	0	0	0	0	0	0	0	0
43.	Tennessee.....TN	N	0	0	0	0	0	0	0	0
44.	Texas.....TX	L	0	(23,558)	0	0	0	0	(23,558)	0
45.	Utah.....UT	N	0	0	0	0	0	0	0	0
46.	Vermont.....VT	N	0	0	0	0	0	0	0	0
47.	Virginia.....VA	L	0	(2,889)	0	0	0	0	(2,889)	0
48.	Washington.....WA	L	0	17,812	0	0	0	0	17,812	0
49.	West Virginia.....WV	L	0	0	0	0	0	0	0	0
50.	Wisconsin.....WI	N	0	0	0	0	0	0	0	0
51.	Wyoming.....WY	N	0	0	0	0	0	0	0	0
52.	American Samoa.....AS	N	0	0	0	0	0	0	0	0
53.	Guam.....GU	N	0	0	0	0	0	0	0	0
54.	Puerto Rico.....PR	N	0	0	0	0	0	0	0	0
55.	U.S. Virgin Islands.....VI	N	0	0	0	0	0	0	0	0
56.	Northern Mariana Islands.....MP	N	0	0	0	0	0	0	0	0
57.	Canada.....CAN	N	0	0	0	0	0	0	0	0
58.	Aggregate Other Aliens.....OT	XXX	0	0	0	0	0	0	0	0
59.	Subtotal	XXX	0	52,994,615	0	0	0	0	52,994,615	0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0
61.	Totals (Direct Business)	(a) 12	0	52,994,615	0	0	0	0	52,994,615	0
DETAILS OF WRITE-INS										
58001.		XXX								
58002.		XXX								
58003.		XXX								
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0

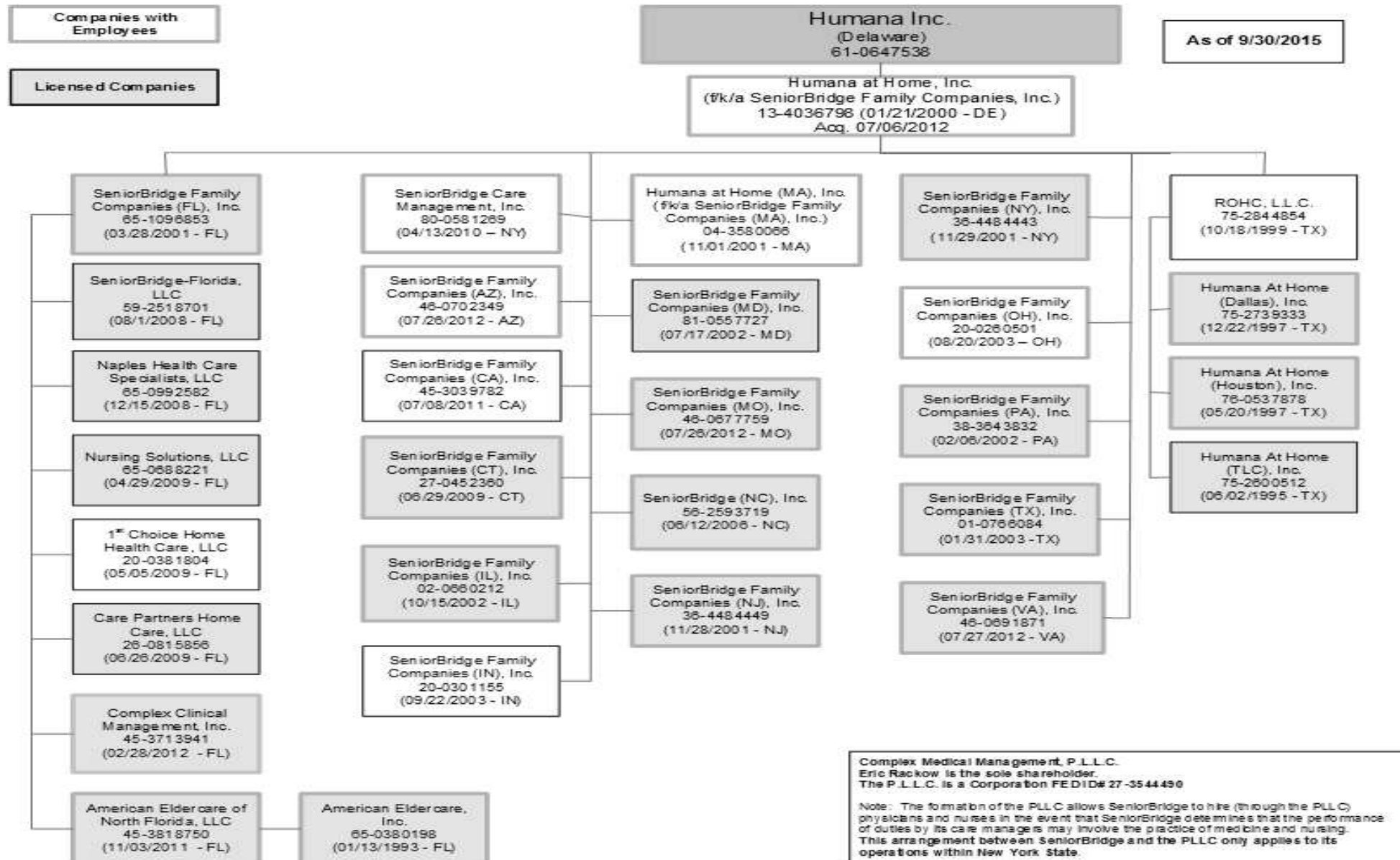
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.
(a) Insert the number of L responses except for Canada and Other Alien.

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

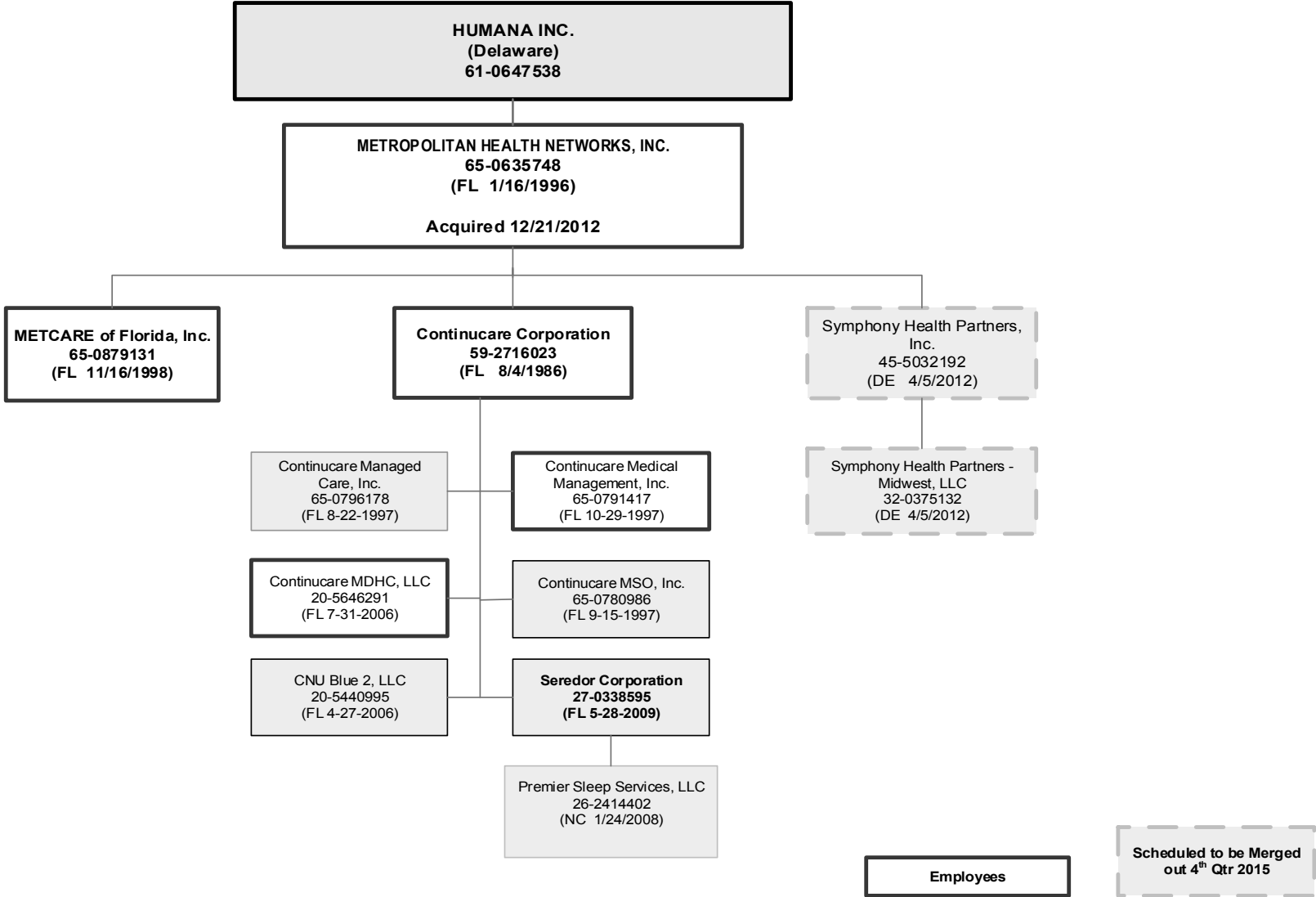
15



STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.



As of 9-30-2015



SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0119	Humana Inc.	00000	65-0851053				154th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0381804				1st Choice Home Health Care, LLC	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5309363				515-526W MainSt CondoCouncil of Co-Owners	KY	NIA	Preservation on Main, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0293220				54th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3818750				American Eldercare of North Florida, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0380198				American Eldercare, Inc.	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12151	20-1001348				Arcadian Health Plan, Inc.	WA	RE	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-0836599				Arcadian Management Services, Inc.	DE	UDP	Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-3715944				Availity, L.L.C.	DE	OTH	See Footnote 1	Board of Directors	0.000	Humana Inc.	1
0119	Humana Inc.	00000	30-0117876				CAC Medical Center Holdings, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0010657				CAC-Florida Medical Centers, LLC	FL	NIA	Humana Inc. SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0815856				Care Partners Home Care, LLC	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1514846				CareNetwork, Inc.	WI	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95092	59-2598550				CarePlus Health Plans, Inc.	FL	IA	CPHP Holdings, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95754	62-1579044				Cariten Health Plan Inc.	TN	IA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95158	61-1279717				CHA HMO, Inc.	KY	IA	CHA Service Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1279716				CHA Service Company	KY	NIA	Humana Health Plan, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5440995				CNU Blue 2, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52015	59-2531815				CompBenefits Company	FL	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3185995				CompBenefits Corporation	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	11228	36-3686002				CompBenefits Dental, Inc.	IL	IA	Dental Care Plus Management Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	58-2228851				CompBenefits Direct, Inc.	DE	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60984	74-2552026				CompBenefits Insurance Company	TX	IA	Humana Dental Company SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3713941				Complex Clinical Management, Inc.	FL	NIA		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	42-1575099				Comprehensive Health Insights, Inc.	IL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-2716023				Continucare Corporation	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0796178				Continucare Managed Care, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5646291				Continucare MDHC, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0791417				Continucare Medical Management, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0780986				Continucare MSO, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-8236655				Corphealth Provider Link, Inc.	TX	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2043865				Humana Behavioral Health, Inc.	TX	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	33-0916248				DefenseWeb Technologies, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	36-3512545				Dental Care Plus Management Corp.	IL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95161	76-0039628				DentiCare, Inc.	TX	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	88595	31-0935772				Emphesys Insurance Company	TX	IA	Emphesys, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1237697				Emphesys, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-1649291				Harris, Rothenberg International Inc.	NY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1223418				Health Value Management, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-4912173				HRI Humana of California Inc.	CA	NIA	Harris, Rothenberg International Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3592783				HUM INT, LLC	DE	NIA	HUM-Holdings International, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-4835394				Humana Active Outlook, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana At Home (Dallas), Inc.	00000	75-2739333				Humana At Home (Dallas), Inc.	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	76-0537878				Humana At Home (Houston), Inc.	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3580066				Humana At Home (MA), Inc.	MA	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0274594				Humana At Home 1, Inc.	FL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0119	Humana Inc.	00000	13-4036798				Humana at Home, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60052	37-1326199				Humana Benefit Plan of Illinois, Inc.	IL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-1843760				Humana Dental Company	FL	NIA	CompBenefits Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52028	36-3654697				Humana Dental Concern, Ltd.	IL	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95519	58-2209549				Humana Employers Health Plan of GA, Inc.	GA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1241225				Humana Government Business, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95642	72-1279235				Humana Health Benefit Plan of LA, Inc.	LA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	13558	26-2800286				Humana Health Company of New York, Inc.	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	69671	61-1041514				Humana Health Ins. Co. of Florida, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3473328				Humana Health Plan of California, Inc.	CA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95348	31-1154200				Humana Health Plan of Ohio, Inc.	OH	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95024	61-0994632				Humana Health Plan of Texas, Inc.	TX	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95885	61-1013183				Humana Health Plan, Inc.	KY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95721	66-0406896				Humana Health Plans of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-0647538		NYSE		Humana Inc.	DE	UIP		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1343791				Humana Innovation Enterprises, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	73288	39-1263473				Humana Insurance Company	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60219	61-1311685				Humana Insurance Company of Kentucky	KY	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12634	20-2888723				Humana Insurance Company of New York	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	84603	66-0291866				Humana Insurance of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-3364857				Humana MarketPOINT of Puerto Rico, Inc.	PR	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1343508				Humana MarketPOINT, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14224	27-3991410				Humana Medical Plan of Michigan, Inc.	MI	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14462	27-4660531				Humana Medical Plan of Pennsylvania, Inc.	PA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12908	20-8411422				Humana Medical Plan of Utah, Inc.	UT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95270	61-1103898				Humana Medical Plan, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-2254346				Humana Pharmacy Solutions, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1316926				Humana Pharmacy, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12282	20-2036444				Humana Regional Health Plan, Inc.	AR	OTH	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-8418853				Humana Veterans Healthcare Services, Inc.	DE	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-4522426				Humana WellWorks LLC	DE	NIA	Health Value Management, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95342	39-1525003				Humana Wisc. Health Org. Ins. Corp.	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	70580	39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1364005				HumanaDental, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-4535747				HumanaVitality, LLC	DE	NIA	HumanaWellworks LLC	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1239538				Humco, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1383567				HUM-e-FL, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3583438				HUM-Holdings International, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-1050795				Hummingbird Coaching Systems LLC	OH	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1769093				Independent Care Health Plan	WI	OTH	See Footnote 2	Other	100.000	Humana Inc.	2
0119	Humana Inc.	65110	57-0380426				Kanawha Insurance Company	SC	IA	KMG America Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-1377270				KMG America Corporation	VA	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1232669				Managed Care Indemnity, Inc.	VT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0879131				METCARE of Florida, Inc.	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0635728				Metropolitan Health Networks, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0992582				Naples Health Care Specialists, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0688221				Nursing Solutions, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1552091				PHP Companies, Inc.	TN	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1250945				Preferred Health Partnership, Inc.	TN	NIA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	*
...0119 ...	Humana Inc. ....	...00000 ...	20-1724127 .....	.....	.....	.....	Preservation on Main, Inc. ....	...KY.....	...NIA.....	Humana Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-1225873 .....	.....	.....	.....	Primary Care Holdings, Inc. ....	...DE.....	...NIA.....	Humana Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	75-2844854 .....	.....	.....	.....	ROHC, L.L.C. ....	...TX.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	56-2593719 .....	.....	.....	.....	SeniorBridge (NC), Inc. ....	...NC.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	80-0581269 .....	.....	.....	.....	SeniorBridge Care Management, Inc. ....	...NY.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-0702349 .....	.....	.....	.....	SeniorBridge Family Companies (AZ), Inc. ....	...AZ.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	45-3039782 .....	.....	.....	.....	SeniorBridge Family Companies (CA), Inc. ....	...CA.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	27-0452360 .....	.....	.....	.....	SeniorBridge Family Companies (CT), Inc. ....	...CT.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	65-1096853 .....	.....	.....	.....	SeniorBridge Family Companies (FL), Inc. ....	...FL.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	02-0660212 .....	.....	.....	.....	SeniorBridge Family Companies (IL), Inc. ....	...IL.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	20-0301155 .....	.....	.....	.....	SeniorBridge Family Companies (IN), Inc. ....	...IN.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	81-0557727 .....	.....	.....	.....	SeniorBridge Family Companies (MD), Inc. ....	...MD.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-0677759 .....	.....	.....	.....	SeniorBridge Family Companies (MO), Inc. ....	...MO.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	36-4484449 .....	.....	.....	.....	SeniorBridge Family Companies (NJ), Inc. ....	...NJ.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	36-4484443 .....	.....	.....	.....	SeniorBridge Family Companies (NY), Inc. ....	...NY.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	20-0260501 .....	.....	.....	.....	SeniorBridge Family Companies (OH), Inc. ....	...OH.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	38-3643832 .....	.....	.....	.....	SeniorBridge Family Companies (PA), Inc. ....	...PA.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	01-0766084 .....	.....	.....	.....	SeniorBridge Family Companies (TX), Inc. ....	...TX.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-0691871 .....	.....	.....	.....	SeniorBridge Family Companies (VA), Inc. ....	...VA.....	...NIA.....	Humana at Home, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	59-2518701 .....	.....	.....	.....	SeniorBridge-Florida, LLC ....	...FL.....	...NIA.....	SeniorBridge Family Companies (FL), Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	27-0338595 .....	.....	.....	.....	Seredor Corporation ....	...FL.....	...NIA.....	Continucare Corporation	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	86-0597187 .....	.....	.....	.....	St. Mary's Medical Park Pharmacy, Inc. ....	...AZ.....	...NIA.....	Humana Pharmacy, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	32-0375132 .....	.....	.....	.....	Symphony Health Partners - Midwest, LLC ....	...DE.....	...NIA.....	See Footnote 3	Ownership.....	...0.000	Humana Inc. ....	....3
...0119 ...	Humana Inc. ....	...00000 ...	45-5032192 .....	.....	.....	.....	Symphony Health Partners, Inc. ....	...DE.....	...NIA.....	Metropolitan Health Networks, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	74-2352809 .....	.....	.....	.....	Texas Dental Plans, Inc. ....	...TX.....	...NIA.....	Humana Dental Company	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...54739 ...	52-1157181 .....	.....	.....	.....	The Dental Concern, Inc. ....	...KY.....	...IA.....	HumanaDental, Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	75-2600512 .....	.....	.....	.....	Humana at Home (TLC), Inc. ....	...TX.....	...NIA.....	ROHC, L.L.C.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	80-0072760 .....	.....	.....	.....	Transcend Insights, Inc. ....	...DE.....	...NIA.....	Humana Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	46-5329373 .....	.....	.....	.....	Transcend, LLC ....	...DE.....	...NIA.....	Humana Inc.	Ownership.....	...100.000	Humana Inc. ....	....0
...0119 ...	Humana Inc. ....	...00000 ...	75-2043865 .....	.....	.....	.....	Humana Behavioral Health, Inc. ....	...TX.....	...IA.....	Humana Inc.	Ownership.....	...100.000	Humana Inc. ....	....0

Asterisk	Explanation
1	Availity, L.L.C., a Delaware limited liability company, was formed by affiliates of Humana Inc. and Blue Cross and Blue Shield of Florida, Inc. to develop and operate an Internet site on the World Wide Web to permit health plans to communicate and engage in electronic transactions with health care service providers initially in the State of Florida. HUM-e-FL, Inc., a subsidiary of Humana Inc., is a Member with a 22.5% ownership interest. Navigy, Inc., a subsidiary of Blue Cross and Blue Shield of Florida, Inc., is a Member with a 33.75% ownership interest, Health Care Service Corporation, a Member, has a 33.75% ownership interest, and Sellcore, Inc., a subsidiary of WellPoint and a Member, has a 10% ownership interest.
2	Independent Care Health Plan, a Wisconsin corporation licensed as an HMO, operates an integrated, coordinated medical and social service managed care program for chronically disabled Medicaid recipients in Milwaukee, Wisconsin. CareNetwork, Inc. owns 50% of the company's stock. Centers of Excellence, Inc. owns the other 50%.
3	Ownership is 80% Symphony Health Partners, Inc. and 20% Humana Inc. of Symphony Health Partners Midwest, LLC.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

Response

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

NO

Explanation:

1. This type of business is not written.

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
2504.	Prepaid Expenses	29,269	29,269	0	0
2597.	Summary of remaining write-ins for Line 25 from overflow page	29,269	29,269	0	0

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest point and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	55,499,570	89,129,928
2. Cost of bonds and stocks acquired	16,655,502	14,896,226
3. Accrual of discount	27,289	44,370
4. Unrealized valuation increase (decrease)	(9,034,496)	(98,435)
5. Total gain (loss) on disposals	470,909	(28,625)
6. Deduct consideration for bonds and stocks disposed of	19,644,979	47,968,159
7. Deduct amortization of premium	267,121	475,735
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	43,706,674	55,499,570
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	43,706,674	55,499,570

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	41,529,931	78,042,241	61,417,069	(90,913)	43,099,147	41,529,931	58,064,190	44,809,722
2. NAIC 2 (a)	4,911,769	289,372	539,136	12,442	5,367,414	4,911,769	4,674,447	5,485,079
3. NAIC 3 (a)	0	215,000	0	(100)	0	0	214,900	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	10,563	0	0	304	9,018	10,563	10,867	8,825
7. Total Bonds	46,452,263	78,546,613	61,956,205	(78,267)	48,475,579	46,452,263	62,964,404	50,303,626
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	46,452,263	78,546,613	61,956,205	(78,267)	48,475,579	46,452,263	62,964,404	50,303,626

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$19,257,732 ; NAIC 2 \$0 ; NAIC 3 \$0 ;
NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals	9,257,849	xxx	9,259,674	3,861	2,502

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	3,838,453	1,832,275
2. Cost of short-term investments acquired	90,721,216	86,313,360
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	85,299,995	84,307,182
7. Deduct amortization of premium	1,825	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	9,257,849	3,838,453
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	9,257,849	3,838,453

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards
N O N E

Schedule DB - Part B - Verification - Futures Contracts
N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open
N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open
N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives
N O N E

SCHEDULE E - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	1,499,981
2. Cost of cash equivalents acquired	17,998,915	999,974
3. Accrual of discount	968	45
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	8,000,000	2,500,000
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	9,999,883	0
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	9,999,883	0

Schedule A - Part 2 - Real Estate Acquired and Additions Made
N O N E

Schedule A - Part 3 - Real Estate Disposed
N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made
N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid
N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made
N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid
N O N E

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
36179R-LP-2	GOVERNMENT NATIONAL MORTGAGE GNMA		.08/25/2015	CREDIT SUISSE FIRST BOSTON CORP.		364,634	349,284	679	1
912828-NK-2	UNITED STATES TREASURY GOVERNMENT		.08/11/2015	BARCLAYS CAPITAL		517,324	500,000	1,461	1
0599999. Subtotal - Bonds - U.S. Governments						881,958	849,284	2,140	XXX
246381-DH-7	DELAWARE STATE MUNI		.08/18/2015	BARCLAYS CAPITAL		96,756	85,000	2,007	1FE
246381-ET-0	DELAWARE STATE MUNI		.08/03/2015	BARCLAYS CAPITAL		57,532	50,000	242	1FE
246381-FA-0	DELAWARE STATE MUNI		.09/24/2015	BARCLAYS CAPITAL		278,775	250,000	3,056	1FE
349425-5W-4	FORT WORTH TEX MUNI		.08/04/2015	CITIGROUP GLOBAL MARKETS INC		73,141	60,000	0	1FE
373384-X9-2	GEORGIA ST MUNI		.08/05/2015	WELLS FARGO		135,304	125,000	538	1FE
467578-H6-8	JACKSON CNTY MO SPL OBLIG MUNI		.08/03/2015	WELLS FARGO		46,196	40,000	361	1FE
56052A-YE-0	MAINE ST MUNI		.09/01/2015	LOOP CAPITAL MARKETS		32,305	30,000	288	1FE
574193-GT-9	MARYLAND ST MUNI		.08/18/2015	CITIGROUP GLOBAL MARKETS INC		63,893	55,000	1,299	1FE
57583P-GD-5	MASSACHUSETTS ST FED HWY MUNI		.08/04/2015	BARCLAYS CAPITAL		72,164	60,000	433	1FE
646066-GY-0	NEW JERSEY ST EDL FACS AUTH RE		.08/03/2015	MERRILL LYNCH, PIERCE, FENNER & SM		50,384	45,000	506	1FE
64966L-J8-2	NEW YORK NY MUNI		.08/03/2015	MERRILL LYNCH, PIERCE, FENNER & SM		103,023	95,000	0	1FE
662903-PT-4	NORTH TEX MUN WTR DIST TEX WTR		.08/04/2015	BARCLAYS CAPITAL		90,041	75,000	1,167	1FE
677521-PJ-9	OHIO ST MUNI		.08/04/2015	WELLS FARGO		31,569	30,000	592	1FE
688443-S7-6	OSSEO MINN INDPST SCH DIST NO 2		.08/03/2015	CITIGROUP GLOBAL MARKETS INC		34,024	30,000	375	1FE
840610-RP-6	SOUTH WASHINGTON CNTY INDPST SC		.08/03/2015	WELLS FARGO		28,344	25,000	316	1FE
914378-HW-7	UNIVERSITY KY GEN RCPTS MUNI		.08/03/2015	CITIGROUP GLOBAL MARKETS INC		40,387	35,000	540	1FE
917542-TK-8	UTAH ST MUNI		.08/11/2015	BARCLAYS CAPITAL		34,469	30,000	179	1FE
928172-K9-5	VIRGINIA ST PUB BLDG AUTH PUB MUNI		.09/02/2015	LOOP CAPITAL MARKETS		64,972	60,000	742	1FE
93978H-ME-2	WASHINGTON ST HEALTH CARE FAC MUNI		.08/07/2015	MORGAN STANLEY		61,648	55,000	1,001	1FE
1799999. Subtotal - Bonds - U.S. States, Territories and Possessions						1,394,927	1,235,000	13,642	XXX
239019-P4-8	DAVIS CNTY UTAH SCH DIST MUNI		.08/12/2015	HUTCH SHOCKLY ERLEY		29,181	25,000	0	1FE
239019-P7-1	DAVIS CNTY UTAH SCH DIST MUNI		.08/12/2015	HUTCH SHOCKLY ERLEY		30,286	25,000	0	1FE
239019-P8-9	DAVIS CNTY UTAH SCH DIST MUNI		.08/12/2015	HUTCH SHOCKLY ERLEY		36,740	30,000	0	1FE
254764-JW-4	DISTRICT COLUMBIA MUNI		.08/14/2015	GOLDMAN SACHS		28,087	25,000	0	1FE
254764-JX-2	DISTRICT COLUMBIA MUNI		.08/14/2015	GOLDMAN SACHS		27,972	25,000	0	1FE
259327-K9-4	DOUGLAS CNTY SCH DIST MUNI		.09/01/2015	LOOP CAPITAL MARKETS		37,113	35,000	307	1FE
3138EK-GU-3	FED NTL MTG ASSO FNMA		.07/30/2015	MERRILL LYNCH		74,936	68,946	103	1
3138EN-Y9-4	FED NTL MTG ASSO FNMA		.07/30/2015	GOLDMAN SACHS		350,395	327,090	436	1
3138EP-AH-7	FED NTL MTG ASSO FNMA		.07/31/2015	J.P. MORGAN		342,180	315,282	473	1
3138EP-LC-6	FED NTL MTG ASSO FNMA		.07/30/2015	MERRILL LYNCH		272,981	251,161	377	1
3138EP-S4-7	FED NTL MTG ASSO FNMA		.08/04/2015	GOLDMAN SACHS		174,713	163,785	218	1
3138EP-TZ-7	FED NTL MTG ASSO FNMA		.08/25/2015	CREDIT SUISSE FIRST BOSTON CORP.		958,066	917,358	1,223	1
3138W9-KQ-2	FED NTL MTG ASSO FNMA		.07/30/2015	J.P. MORGAN		24,330	24,228	24	1
3138WE-CQ-0	FED NTL MTG ASSO FNMA		.08/24/2015	GOLDMAN SACHS		1,006,238	929,282	1,342	1
31418A-VS-4	FED NTL MTG ASSO FNMA		.07/30/2015	J.P. MORGAN		323,201	321,844	322	1
349515-TG-1	FORT WORTH TEX WTR & SWR REV MUNI		.08/04/2015	BARCLAYS CAPITAL		42,735	35,000	0	1FE
349515-TH-9	FORT WORTH TEX WTR & SWR REV MUNI		.08/04/2015	BARCLAYS CAPITAL		78,447	65,000	0	1FE
349515-TJ-5	FORT WORTH TEX WTR & SWR REV MUNI		.08/04/2015	BARCLAYS CAPITAL		47,940	40,000	0	1FE
373384-Y6-7	GEORGIA ST MUNI		.09/01/2015	LOOP CAPITAL MARKETS		26,599	25,000	191	1FE
495289-SY-7	KING COUNTY SWEER REV MUNI		.08/26/2015	LOOP CAPITAL MARKETS		55,873	50,000	447	1FE
508248-BC-4	LAKE CNTY FLA CAP IMPT REV MUNI		.08/13/2015	J.P. MORGAN		118,564	110,000	1,176	1FE
508248-BD-2	LAKE CNTY FLA CAP IMPT REV MUNI		.08/13/2015	J.P. MORGAN		118,564	110,000	1,176	1FE
58259Y-3Q-0	METROPOLITAN TRANSN AUTH NY REV F		.08/07/2015	BARCLAYS CAPITAL		55,497	50,000	604	1FE
60412A-CZ-4	MINNESOTA ST FOR PREVIOUS ISSU		.08/11/2015	MERRILL LYNCH		45,913	40,000	0	1FE
60412A-DT-7	MINNESOTA ST FOR PREVIOUS ISSU		.08/05/2015	CITIGROUP GLOBAL MARKETS INC		86,650	80,000	0	1FE
60412A-DV-2	MINNESOTA ST FOR PREVIOUS ISSU		.08/25/2015	WELLS FARGO		63,217	55,000	69	1FE
60412A-EA-7	MINNESOTA ST FOR PREVIOUS ISSU		.09/17/2015	CITIGROUP GLOBAL MARKETS INC		91,613	75,000	344	1FE
60412A-EB-5	MINNESOTA ST FOR PREVIOUS ISSU		.08/11/2015	CITIGROUP GLOBAL MARKETS INC		86,792	70,000	0	1FE
646066-GZ-7	NEW JERSEY ST EDL FACS AUTH RE		.08/10/2015	CITIGROUP GLOBAL MARKETS INC		45,963	40,000	489	1FE
64966L-MX-6	NEW YORK NY MUNI		.08/19/2015	MERRILL LYNCH		75,820	70,000	224	1FE
64966L-RC-7	NEW YORK NY MUNI		.08/19/2015	MERRILL LYNCH		70,431	65,000	208	1FE
64990A-DO-5	NEW YORK ST DORM AUTH SALES TA		.09/17/2015	MORGAN STANLEY		127,450	105,000	102	1FE
64990B-JU-8	NEW YORK ST DORM AUTH REVS MUNI		.08/10/2015	CITIGROUP GLOBAL MARKETS INC		35,787	30,000	263	1FE
658196-SH-9	NORTH CAROLINA ESATN MUN PIWR A		.08/26/2015	BARCLAYS CAPITAL		42,383	40,000	333	1FE
662903-PU-1	NORTH TEX MUN WTR DIST TEX WTR		.08/04/2015	BARCLAYS CAPITAL		35,812	30,000	467	1FE
667825-UJ-0	NORTHWEST TEX INDPST SCH DIST MUNI		.08/26/2015	WELLS FARGO		37,298	35,000	58	1FE
796253-X4-9	SAN ANTONIO TEX ELEC & GAS RE MUNI		.09/01/2015	WELLS FARGO		74,402	70,000	369	1FE
860758-RD-5	STILLWATER MINN INDPST SCH DIST		.08/03/2015	PIPER JAFFREY		28,992	25,000	0	1FE
860758-RF-0	STILLWATER MINN INDPST SCH DIST		.08/11/2015	WELLS FARGO		35,605	30,000	0	1FE

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2		3	4	5	6	7	8	9	10
CUSIP Identification	Description		Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
88283L-JX-5	TX TRANSN COMMN ST HWY FD R	MUNI		.08/13/2015	CITIGROUP GLOBAL MARKETS INC		173,236	140,000	.506	1
91514A-BK-0	UNIVERSITY TEX UNIV REVS	MUNI		.08/04/2015	LOOP CAPITAL MARKETS		67,836	55,000	1,314	1FE
917567-AY-5	UTAH TRAN AUTHORITY SALES TAX	MUNI		.09/01/2015	BARCLAYS CAPITAL		63,355	55,000	.603	1FE
924214-JX-5	VERMONT ST MUNI BOND BANK	MUNI		.08/04/2015	CITIGROUP GLOBAL MARKETS INC		35,656	35,000	.0	1FE
92778V-BR-8	VIRGINIA COLLEGE BLDG AUTH	MUNI		.08/10/2015	WELLS FARGO		92,465	80,000	.0	1FE
3199999. Subtotal - Bonds - U.S. Special Revenues							5,677,314	5,193,976	13,768	XXX
09062X-AF-0	BIOTEN INC	CORPORATE		.09/10/2015	MERRILL LYNCH		49,882	50,000	.0	2FE
120111-BN-8	BUILDING MATERIALS CORP	CORPORATE		.09/22/2015	DEUTSCHE BANK		175,000	175,000	.0	3FE
12189L-AY-7	BURLINGTON NORTH	CORPORATE		.08/14/2015	VARIOUS		89,737	90,000	.0	2FE
151020-AQ-7	CELGENE CORPORATION	CORPORATE		.08/12/2015	VARIOUS		149,753	150,000	.8	2FE
235851-AQ-5	DANAHER CORPORATION	CORPORATE		.09/10/2015	CITIGROUP GLOBAL MARKETS INC		19,971	20,000	.0	1FE
25468P-DF-0	THE WALT DISNEY COMPANY	CORPORATE		.09/14/2015	GOLDMAN SACHS		99,762	100,000	.0	1FE
26442U-AA-2	DUKE ENERGY PROGRESS INC	CORPORATE		.08/10/2015	WELLS FARGO		154,527	155,000	.0	1FE
35804G-AK-4	FRESENIUS US FINANCE II INC	CORPORATE		.09/16/2015	GOLDMAN SACHS		40,000	40,000	.0	3FE
375558-BF-9	GILEAD SCIENCES INC	CORPORATE		.09/09/2015	J.P. MORGAN		29,879	30,000	.0	1FE
40428H-PV-8	HSBC BANK USA	CORPORATE		.08/04/2015	HSBC SECURITIES INC.		349,692	350,000	.0	1FE
665772-CN-7	NORTHERN STATES POWER	CORPORATE		.08/04/2015	MORGAN STANLEY		44,265	45,000	.0	1FE
828807-CJ-9	SIMON PROPERTY GROUP LP	CORPORATE		.08/10/2015	CITIGROUP GLOBAL MARKETS INC		104,940	105,000	.0	1FE
87165L-AT-8	SYNCT 15-4:A	ABS FTST		.09/25/2015	BARCLAYS CAPITAL		99,999	100,000	.0	1FE
94974B-GM-6	WELLS FARGO & CO	CORPORATE		.07/15/2015	WELLS FARGO		89,950	90,000	.0	1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)							1,497,357	1,500,000	8	XXX
8399997. Total - Bonds - Part 3							9,451,556	8,778,260	29,558	XXX
8399998. Total - Bonds - Part 5							XXX	XXX	XXX	XXX
8399999. Total - Bonds							9,451,556	8,778,260	29,558	XXX
8999997. Total - Preferred Stocks - Part 3							0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5							XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3							0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5							XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							0	XXX	0	XXX
9899999. Total - Preferred and Common Stocks							0	XXX	0	XXX
9999999 - Totals							9,451,556	XXX	29,558	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2		3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
											11	12	13	14	15							
CUSIP Ident-ification	Description		For-ign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn-ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con-tractual Maturity Date	NAIC Desig-nation or Market In-dicator (a)
3128X2-RL-1	FREDDIE MAC	AGCY FTST		08/01/2015	MATURITY		200,000	200,000	221,901	203,936	.0	(3,936)	.0	(3,936)	.0	200,000	.0	.0	.0	10,700	08/01/2015	1FE
31331X-Q7-0	FEDERAL FARM CREDIT BANK	AGCY FTSE		07/27/2015	NATHAN HALE CAPITAL		627,675	500,000	593,628	580,174	.0	(3,037)	.0	(3,037)	.0	577,137	.0	50,538	50,538	16,756	12/30/2026	1FE
31331Y-VR-8	FEDERAL FARM CREDIT BANK	AGCY FTSE		07/28/2015	NATHAN HALE CAPITAL		327,702	300,000	310,467	305,890	.0	(1,021)	.0	(1,021)	.0	304,869	.0	22,833	22,833	12,920	02/27/2018	1FE
3133MD-YF-4	FEDERAL HOME LOAN BANK	AGCY FTSE		07/27/2015	NATHAN HALE CAPITAL		603,825	500,000	592,397	566,762	.0	(5,673)	.0	(5,673)	.0	561,089	.0	42,736	42,736	28,583	02/12/2021	1FE
3133XD-VS-7	FEDERAL HOME LOAN BANK	AGCY FTSE		07/28/2015	NATHAN HALE CAPITAL		234,020	200,000	212,942	209,365	.0	(815)	.0	(815)	.0	208,550	.0	25,470	25,470	6,650	12/11/2020	1FE
					INTL FCSTONE PARTNERS																	
3133XT-B2-1	FEDERAL HOME LOAN BANK	AGCY FTSE		07/28/2015	L.P.		219,846	200,000	214,598	209,175	.0	(1,197)	.0	(1,197)	.0	207,978	.0	11,868	11,868	7,716	03/06/2019	1FE
31398A-U3-4	FANNIE MAE	AGCY FTST		07/28/2015	MATURITY		200,000	200,000	203,350	200,594	.0	(594)	.0	(594)	.0	200,000	.0	.0	.0	4,750	07/28/2015	1FE
36202E-LJ-6	GOVERNMENT NATIONAL MORTGAGE	GNMA		09/21/2015	MBS PAYDOWN		2,994	2,994	2,961	2,980	.0	.13	.0	.13	.0	2,994	.0	.0	.0	.0	12/01/2036	1
36225B-5M-6	GOVERNMENT NATIONAL MORTGAGE	GNMA		09/01/2015	MBS PAYDOWN		2,535	2,535	2,542	2,537	.0	(1)	.0	(1)	.0	2,535	.0	.0	.0	.84	06/01/2019	1
36241K-KV-9	GOVERNMENT NATIONAL MORTGAGE	GNMA		09/01/2015	MBS PAYDOWN		3,358	3,358	3,328	3,352	.0	.5	.0	.5	.0	3,358	.0	.0	.0	123	08/01/2021	1
36290R-QT-3	GOVERNMENT NATIONAL MORTGAGE	GNMA		09/01/2015	MBS PAYDOWN		10,365	10,365	10,235	10,346	.0	.19	.0	.19	.0	10,365	.0	.0	.0	345	06/01/2033	1
36291N-DU-2	GOVERNMENT NATIONAL MORTGAGE	GNMA		09/01/2015	MBS PAYDOWN		5,984	5,984	6,003	5,986	.0	(3)	.0	(3)	.0	5,984	.0	.0	.0	219	01/01/2021	1
36291U-AS-4	GOVERNMENT NATIONAL MORTGAGE	GNMA		09/01/2015	MBS PAYDOWN		2,092	2,092	2,058	2,086	.0	.7	.0	.7	.0	2,092	.0	.0	.0	70	12/01/2019	1
36297A-KC-6	GOVERNMENT NATIONAL MORTGAGE	GNMA		08/31/2015	VARIOUS		188,440	176,326	179,747	179,704	.0	(1,205)	.0	(1,205)	.0	178,499	.0	9,941	9,941	5,538	01/01/2024	1
912828-IV-8	US TREASURY N/B	GOVERNMENT		08/31/2015	MATURITY		500,000	500,000	496,750	499,356	.0	644	.0	644	.0	500,000	.0	.0	.0	3,125	08/31/2015	1
0599999 Subtotal - Bonds - U.S. Governments							3,128,836	2,803,654	3,052,907	2,982,243	0	(16,794)	0	(16,794)	0	2,965,450	0	163,386	163,386	97,672	XXX	XXX
041042-ZH-8	ARKANSAS ST	MUNI		08/25/2015	MERRILL LYNCH		194,222	160,000	195,541	195,342	.0	(2,138)	.0	(2,138)	.0	193,205	.0	1,018	1,018	5,933	10/01/2026	1FE
					CITIGROUP GLOBAL MARKETS																	
207758-QJ-5	CONNECTICUT ST	MUNI		08/25/2015	INC		884,385	750,000	923,166	894,782	.0	(10,947)	.0	(10,947)	.0	883,835	.0	.550	.550	43,438	01/01/2024	1FE
419791-BF-0	HAWAII ST	MUNI		07/28/2015	WELLS FARGO		120,727	100,000	121,842	121,611	.0	(2,692)	.0	(2,692)	.0	118,919	.0	1,808	1,808	3,417	08/01/2023	1FE
					CITIGROUP GLOBAL MARKETS																	
57582P-7C-8	MASSACHUSETTS ST	MUNI		08/03/2015	INC		246,026	200,000	246,616	245,600	.0	(2,264)	.0	(2,264)	.0	243,338	.0	2,687	2,687	8,664	08/01/2025	1FE
					FIDELITY CAPITAL MARKETS																	
57585K-3F-3	MA ST HLTH & ED - MIT	MUNI		08/03/2015	DIV OF N		202,033	165,000	202,406	201,353	.0	(2,347)	.0	(2,347)	.0	199,005	.0	3,028	3,028	9,052	07/01/2023	1FE
					CITIGROUP GLOBAL MARKETS																	
604129-4F-0	MINNESOTA ST	MUNI		08/03/2015	INC		360,681	300,000	365,118	363,026	.0	(4,623)	.0	(4,623)	.0	358,402	.0	2,279	2,279	14,375	08/01/2022	1FE
					CITIGROUP GLOBAL MARKETS																	
92817L-PF-4	VIRGINIA ST RES AUTH CLEAN WTR			07/30/2015	INC		180,257	150,000	182,877	181,913	.0	(2,265)	.0	(2,265)	.0	179,648	.0	.608	.608	6,333	10/01/2022	1FE
					RBC DOMINION SECURITIES																	
97705M-AH-8	WISC ST FOR ISSUES DTD PR	MUNI		07/30/2015	CORP.		198,257	170,000	197,135	.0	.0	(513)	.0	(513)	.0	196,622	.0	1,635	1,635	.803	05/01/2020	1FE
97705M-AJ-4	WISC ST FOR ISSUES DTD PR	MUNI		07/29/2015	J.P. MORGAN		112,409	95,000	111,768	.0	.0	(252)	.0	(252)	.0	111,516	.0	893	893	435	05/01/2021	1FE
1799999 Subtotal - Bonds - U.S. States, Territories and Possessions							2,498,997	2,090,000	2,546,469	2,203,627	0	(28,041)	0	(28,041)	0	2,484,490	0	14,506	14,506	92,450	XXX	XXX
78615R-CU-5	SACRAMENTO CNTY CALIF WTR FING			07/30/2015	MORGAN STANLEY		453,050	500,000	405,000	412,969	.0	2,223	.0	2,223	.0	415,192	.0	37,858	37,858	2,433	06/01/2034	1FE
2499999 Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions							453,050	500,000	405,000	412,969	0	2,223	0	2,223	0	415,192	0	37,858	37,858	2,433	XXX	XXX
3128M8-RT-3	FGOLD 30YR GIANY	FHLMC		09/01/2015	MBS PAYDOWN		7,848	7,848	8,429	7,904	.0	(56)	.0	(56)	.0	7,848	.0	.0	.0	211	04/01/2041	1
3128MB-DN-4	FREDDIE MAC	FHLMC		09/01/2015	VARIOUS		2,718	2,718	2,759	2,727	.0	(8)	.0	(8)	.0	2,718	.0	.0	.0	110	04/01/2022	1
3132GK-ZQ-2	FGOLD 30 YR	FHLMC		09/01/2015	MBS PAYDOWN		6,397	6,397	6,870	6,441	.0	(45)	.0	(45)	.0	6,397	.0	.0	.0	169	11/01/2041	1
3138EK-GU-3	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		1,632	1,632	1,774	.0	.0	.0	.0	.0	.0	1,632	.0	.0	.0	.6	03/01/2042	1
3138EN-Y9-4	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		3,241	3,241	3,472	.0	.0	.0	.0	.0	.0	3,241	.0	.0	.0	11	12/01/2044	1
3138EP-AH-7	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		7,575	7,575	8,221	.0	.0	(1)	.0	(1)	.0	7,575	.0	.0	.0	28	02/01/2045	1
3138EP-LC-6	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		4,864	4,864	5,287	.0	.0	.0	.0	.0	.0	4,864	.0	.0	.0	18	01/01/2043	1
3138EP-S4-7	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		2,866	2,866	3,057	.0	.0	.0	.0	.0	.0	2,866	.0	.0	.0	10	07/01/2045	1
3138W1-4Q-7	FED NTL MTG ASSO	30YR		09/01/2015	MBS PAYDOWN		35,005	35,005	36,238	35,078	.0	(73)	.0	(73)	.0	35,005	.0	.0	.0	677	03/01/2043	1
3138W7-QF-5	FNMA 30YR TBA	FNMA		08/31/2015	VARIOUS		706,705	705,091	681,570	681,237	.0	2,082	.0	2,082	.0	683,319	.0	23,386	23,386	14,770	03/01/2043	1
3138W9-KQ-2	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		184	.0	185	.0	.0	.0	.0	.0	.0	184	.0	.0	.0	.0	08/01/2043	1
3138WE-AC-3	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		22,093	22,093	23,195	.0	.0	(63)	.0	(63)	.0	22,093	.0	.0	.0	284	03/01/2030	1
3138WE-AJ-8	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		1,449	1,449	1,520	.0	.0	(4)	.0	(4)	.0	1,449	.0	.0	.0	19	02/01/2030	1
3138WE-AM-1	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		3,340	3,340	3,506	.0	.0	(10)	.0	(10)	.0	3,340	.0	.0	.0	46	02/01/2030	1
3138WP-JE-5	FNMA 15YR			09/01/2015	MBS PAYDOWN		23,659	23,659	24,718	23,776	.0	(118)	.0	(118)	.0	23,659	.0	.0	.0	398	04/01/2028	1
3138XQ-BE-0	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		5,368	5,368	5,635	.0	.0	(19)	.0	(19)	.0	5,368	.0	.0	.0	67	04/01/2029	1
3138YF-E3-4	FED NTL MTG ASSO	FNMA		09/01/2015	MBS PAYDOWN		541	541	567	.0	.0	(1)	.0	(1)	.0	541	.0	.0	.0	7	02/01/2030	1
31418A-VS-4	FED NTL MTG ASSO	FNMA		09/30/2015	VARIOUS		326,567	321,844	323,201	.0	.0	(12)	.0	(12)	.0	323,190	.0	3,378	3,378	1,151	08/01/2043	1
373384-Y3-4	GA ST	MUNI		07/29/2015	MERRILL LYNCH		189,743	165,000	188,384	.0	.0	(383)	.0	(383)	.0	188,000	.0	1,743	1,743	550	07/01/2019	1FE
					CITIGROUP GLOBAL MARKETS																	
494890-A2-2	KING COUNTY WA	MUNI		07/28/2015	INC		76,544	65,000	75,830	.0	.0	(262)	.0	(262)	.0	75,567	.0	.977	.977	885	12/01/2020	1FE
68607V-P3-3	OREGON ST DEPT ADMINISTRATIVE	MUNI		07/28/2015	RAYMOND JAMES		52,441	45,000	52,094	.0	.0	(198)	.0	(198)	.0	51,896	.0	545	545	750	04/01/2020	1FE

STATEMENT AS OF SEPTEMBER 30, 2015 OF THE Arcadian Health Plan, Inc.

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation or Market In- dicator (a)	
70914P-YH-9	PENNSYLVANIA ST MUNI		08/13/2015	MERRILL LYNCH		135,310	125,000	135,310	.0	.0	(.437)	.0	(.437)	.0	134,873	.0	.437	.437	1,076	08/15/2017	1FE	
88283L-JX-5	TX TRANSN COMMN ST HWY FD R MUNI		08/25/2015	CITIGROUP GLOBAL MARKETS INC		173,592	140,000	173,236	.0	.0	(.77)	.0	(.77)	.0	173,159	.0	.433	.433	.688	10/01/2025	1	
3199999. Subtotal - Bonds - U.S. Special Revenues						1,789,682	1,695,715	1,765,058	757,163	0	315	0	315	0	1,758,784	0	30,899	30,899	21,931	XXX	XXX	
00206R-AJ-1	AT&T INC CORPORATE		07/29/2015	VARIOUS		217,710	200,000	198,273	199,016	.0	183	.0	183	.0	199,199	.0	18,511	18,511	11,061	02/01/2018	2FE	
037411-AS-4	APACHE CORP CORPORATE		09/01/2015	CALLED SECURITY at 107,484		214,967	200,000	205,737	202,612	.0	12,356	.0	12,356	.0	214,967	.0	.0	.0	11,250	01/15/2017	2FE	
07388R-AF-4	BEAR STEARNS CO. CMBS		09/11/2015	VARIOUS		.283	.283	.313	.302	.0	(.19)	.0	(.19)	.0	.283	.0	.0	.0	.14	02/01/2044	1FM	
073902-PN-2	BEAR STEARNS CO. CORPORATE		07/30/2015	MILLENNIUM ADVISORS LLC		105,583	100,000	99,455	99,749	.0	.70	.0	.70	.0	99,818	.0	5,765	5,765	5,735	01/22/2017	1FE	
12543P-AK-9	COUNTRYWIDE HOME LOANS CMO		09/25/2015	CALLED SECURITY at 100,000		.854	.854	.723	.729	.0	125	.0	125	.0	.854	.0	.0	.0	.30	02/25/2037	1FM	
14309U-AA-0	CARLYLE HOLDINGS FINANCE LLC CORPORATE		07/27/2015	BARCLAYS CAPITAL		50,947	50,000	49,983	49,985	.0	.2	.0	.2	.0	49,987	.0	.959	.959	1,932	02/01/2023	1FE	
17311A-AD-7	CITICORP MORTGAGE SECURITIES, CMO		09/25/2015	CALLED SECURITY at 100,000		.189	.189	.189	.189	.0	.0	.0	.0	.0	.189	.0	.0	.0	.8	12/25/2021	1FM	
20173W-AF-5	CMULTI CMBS		09/10/2015	VARIOUS		.805	.805	.914	.899	.0	(.94)	.0	(.94)	.0	.805	.0	.0	.0	.33	12/01/2049	1FM	
36962G-3U-6	GENERAL ELECTRIC CAPITAL CORP CORPORATE		07/29/2015	BARCLAYS CAPITAL		331,152	300,000	279,846	287,898	.0	1,932	.0	1,932	.0	289,830	.0	41,322	41,322	12,750	05/01/2018	1FE	
40621P-AB-5	HALLIBURTON COMPANY CORPORATE		08/04/2015	ROBERT BAIRD		218,500	200,000	217,341	208,635	.0	(2,073)	.0	(2,073)	.0	206,562	.0	11,938	11,938	15,311	05/12/2017	1FE	
437076-AP-7	HOME DEPOT CORPORATE		07/30/2015	ROBERT BAIRD		102,751	100,000	99,268	99,758	.0	120	.0	120	.0	99,878	.0	2,873	2,873	4,995	03/01/2016	1FE	
45905A-DE-5	INTL BK RECON & DEV CORPORATE		07/31/2015	SUSQUEHANNA INTERNATIONAL SECURITIES		187,500	300,000	124,591	143,264	.0	4,395	.0	4,395	.0	147,660	.0	39,840	39,840	.0	07/15/2029	1FE	
46623P-AC-2	JPMCC 06-LDP9 CMBS		09/15/2015	VARIOUS		3,188	3,188	3,650	3,494	.0	(306)	.0	(306)	.0	3,188	.0	.0	.0	.117	05/01/2047	1FM	
46630J-AC-3	JP MORGAN CHASE CMBS		09/15/2015	VARIOUS		5,624	5,624	6,465	6,199	.0	(575)	.0	(575)	.0	5,624	.0	.0	.0	.206	01/01/2049	1FM	
46632H-AG-6	JPMCC 07-LD12 CMBS		09/15/2015	VARIOUS		.219	.219	.249	.239	.0	(.20)	.0	(.20)	.0	.219	.0	.0	.0	.9	02/01/2051	1FM	
585055-AH-9	MEDTRONIC INC CORPORATE		09/15/2015	MATURITY		200,000	200,000	198,457	199,650	.0	.350	.0	.350	.0	200,000	.0	.0	.0	9,500	09/15/2015	1FE	
60687V-AF-2	MLOFC 06-3 CMBS		09/14/2015	VARIOUS		.726	.726	.800	.774	.0	(.48)	.0	(.48)	.0	.726	.0	.0	.0	.27	07/01/2046	1FM	
61750W-AS-2	MSC-99 CMBS		09/15/2015	VARIOUS		11,853	11,853	13,050	12,945	.0	(1,092)	.0	(1,092)	.0	11,853	.0	.0	.0	.377	12/01/2043	1FM	
61751N-AB-8	MSC 07-HQ11		09/14/2015	VARIOUS		.409	.409	.447	.433	.0	(.24)	.0	(.24)	.0	.409	.0	.0	.0	.15	02/01/2044	1FM	
709599-AL-8	PENSKE TRUCK LEASING COMPANY LP		07/24/2015	U.S. BANCORP		25,370	25,000	24,946	24,964	.0	.6	.0	.6	.0	24,970	.0	.401	.401	.743	07/17/2018	2FE	
86787G-AG-7	SUNTRUST BANK CORPORATE		09/01/2015	INVESTMENTS, INC		100,000	100,000	97,470	99,459	.0	541	.0	541	.0	100,000	.0	.0	.0	5,000	09/01/2015	2FE	
911308-AA-2	UPS OF AMERICA INC CORPORATE		07/30/2015	MILLENNIUM ADVISORS LLC		126,534	100,000	118,954	113,320	.0	(1,320)	.0	(1,320)	.0	111,999	.0	14,535	14,535	7,049	04/01/2020	1FE	
913017-AR-0	UNITED TECHNOLOGIES CORP CORPORATE		08/03/2015	MITSUBISHI SECURITIES		379,269	300,000	377,706	352,839	.0	(5,855)	.0	(5,855)	.0	346,984	.0	32,285	32,285	19,303	11/15/2019	1FE	
92978P-AF-6	WBMT 03 CMBS		09/17/2015	USA		9,738	9,738	10,725	9,752	.0	(.15)	.0	(.15)	.0	9,738	.0	.0	.0	.386	11/01/2048	1FM	
85235X-AC-9	STADSHYPOTEK AB CORPORATE	F	08/24/2015	RBS SECURITIES INC		250,750	250,000	248,973	249,285	.0	.96	.0	.96	.0	249,380	.0	1,370	1,370	4,232	10/02/2019	1FE	
8999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						2,544,921	2,458,888	2,378,525	2,366,389	0	8,735	0	8,735	0	2,375,122	0	169,799	169,799	110,083	XXX	XXX	
8399997. Total - Bonds - Part 4						10,415,486	9,548,257	10,147,959	8,722,391	0	(33,562)	0	(33,562)	0	9,999,038	0	416,448	416,448	324,569	XXX	XXX	
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. Total - Bonds						10,415,486	9,548,257	10,147,959	8,722,391	0	(33,562)	0	(33,562)	0	9,999,038	0	416,448	416,448	324,569	XXX	XXX	
8999997. Total - Preferred Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799997. Total - Common Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9899999. Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - Totals						10,415,486	XXX	10,147,959	8,722,391	0	(33,562)	0	(33,562)	0	9,999,038	0	416,448	416,448	324,569	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....0

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
					First Month	Second Month	Third Month	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date				*
US BANK Knoxville, TN		0.000	0	0	(872,778)	(729,634)	(817,507)	XXX
JP MORGAN CHASE New York, NY		0.000	0	0	17,330	61,102	58,302	XXX
BANK OF NY West Paterson, NJ		0.000	0	0	32,603	37,120	43,651	XXX
0199998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	(822,845)	(631,412)	(715,554)	XXX
0299998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	(822,845)	(631,412)	(715,554)	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
.....								
.....								
.....								
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.....								
.....								
.....								
0599999. Total - Cash	XXX	XXX	0	0	(822,845)	(631,412)	(715,554)	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

[illegible]